

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(703) 746-4000

or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

22511 7590 11/23/2004

OSHA & MAY L.L.P.
1221 MCKINNEY STREET
HOUSTON, TX 77010

02/14/2005 MBERHE1 00000024 10622243

01 FC:1501 1400.00 OP
02 FC:1504 300.00 OP
03 FC:8001 12.00 OP



Note: A certificate of mailing can only be used for domestic mailings of Fee(s) Transmittal. This certificate cannot be used for any other accompany papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

| | | |
|--------------------------|--|--------------------|
| <i>Lisa H. Smith</i> | | (Depositor's name) |
| <i>Lisa H. Smith</i> | | (Signature) |
| <i>February 10, 2005</i> | | (D) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/622,243 | 07/18/2003 | Shingo Hamada | 04536.017001 | 3128 |

TITLE OF INVENTION: PROJECTOR

PROJECTOR WITH IMPROVED FOCUS RING

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1370 | \$300 | \$1670 | 02/23/2005 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|-----------------|----------|----------------|
| SEVER, ANDREW T | 2851 | 353-101000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 OSHA & MAY L.L.P.

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

FUNAI ELECTRIC CO., LTD.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Daito-shi, Osaka, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

- Issue Fee
- Publication Fee (No small entity discount permitted)
- Advance Order - # of Copies 4

A check in the amount of the fee(s) is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fee(s), or credit any overpayment Deposit Account Number 50-0591 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

PS #45,079

Date 2/10/05

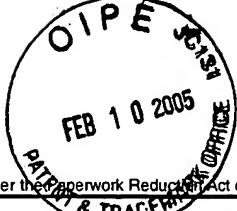
Typed or printed name Jonathan P. Osha

Registration No. 33,986

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).
Effective on 12/08/2004.

FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

| | | |
|-------------------------|------|----------|
| TOTAL AMOUNT OF PAYMENT | (\$) | 1,712.00 |
|-------------------------|------|----------|

| Complete if Known | |
|--------------------------|------------------------|
| Application Number | 10/622,243-Conf. #3128 |
| Filing Date | July 18, 2003 |
| First Named Inventor | Shingo Hamada |
| Examiner Name | A. T. Sever |
| Art Unit | 2851 |
| Attorney Docket No. | 04536/017001 |

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____
 Deposit Account Deposit Account Number: 50-0591 Deposit Account Name: Osha & May L.L.P.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| <u>Application Type</u> | <u>FILING FEES</u> | | <u>SEARCH FEES</u> | | <u>EXAMINATION FEES</u> | | <u>Fees Paid (\$)</u> |
|-------------------------|--------------------|------------------------------|--------------------|------------------------------|-------------------------|------------------------------|-----------------------|
| | <u>Fee (\$)</u> | <u>Small Entity Fee (\$)</u> | <u>Fee (\$)</u> | <u>Small Entity Fee (\$)</u> | <u>Fee (\$)</u> | <u>Small Entity Fee (\$)</u> | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

| | | | |
|---------------------|---------------------|-----------------|----------------------|
| <u>Total Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|---------------------|---------------------|-----------------|----------------------|

| | |
|-----------------|------------------------------|
| <u>Fee (\$)</u> | <u>Small Entity Fee (\$)</u> |
|-----------------|------------------------------|

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

| | | | |
|---------------------|---------------------|-----------------|----------------------|
| <u>Total Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|---------------------|---------------------|-----------------|----------------------|

Multiple Dependent Claims

| | |
|-----------------|----------------------|
| <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|-----------------|----------------------|

| | | | |
|----------------------|---------------------|-----------------|----------------------|
| <u>Indep. Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|----------------------|---------------------|-----------------|----------------------|

| | |
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| _____ | _____ |
|-------|-------|

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| | | | | |
|---------------------|---------------------|---|-----------------|----------------------|
| <u>Total Sheets</u> | <u>Extra Sheets</u> | <u>Number of each additional 50 or fraction thereof</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|---------------------|---------------------|---|-----------------|----------------------|

| | | | | |
|-------|---------|-----|--------------------------------|---|
| _____ | - 100 = | /50 | (round up to a whole number) x | = |
|-------|---------|-----|--------------------------------|---|

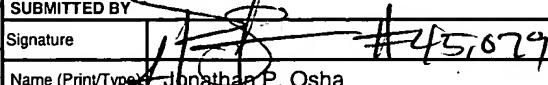
4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1504 Publication fee for early, voluntary, or normal ... 300.00

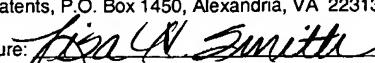
1501 Utility issue fee 1,400.00

8001 Printed copy of patent w/o color 12.00

| | | | | |
|-------------------------------------|---|--------------------------------------|-------------------|--------------------------|
| SUBMITTED BY | | | | |
| Signature |  | Registration No. (Attorney/Agent) | 33,986 | Telephone (713) 228-8600 |
| Name (Print/Type): Jonathan P. Osha | | Date | February 10, 2005 | |

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 562275295 US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: February 10, 2005

Signature:  (Lisa H. Smith)



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Dated: February 10, 2005


(Lisa H. Smith)

Docket No.: 04536/017001
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Shingo Hamada

Application No.: 10/622,243

Group Art Unit: 2851

Filed: July 18, 2003

Examiner: A. T. Sever

For: PROJECTOR WITH IMPROVED FOCUS
RING

TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Enclosed are the following items for filing in connection with the above-referenced Patent Application:

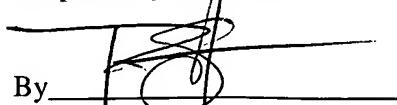
1. Part B- Issue Fee Transmittal (1 page);
2. Fee Transmittal (1 page); and
3. Payment by credit card. Form PTO-2038 is attached (1 page). Charge \$1,712.00 to credit card;

Please charge our Credit Card in the amount of \$1,712.00 covering the required fees. Credit Card Payment Form SB-2038, with a signature from an authorized cardholder, is enclosed. The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this

application by this firm) to our Deposit Account No. 50-0591, under Order No. 04536/017001.

Dated: February 10, 2005

Respectfully submitted,

By 

Thomas K. Scherer
Registration No.: 45,079
OSHA & MAY L.L.P.
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Houston, Texas 77010
(713) 228-8600